Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90133 004 ***158.75

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # .168569

1. Corporation Name					
MAGNUM ENVIRONMENTAL SERVICES, INC.					
110,100		,		LERBERG ALIA BILA BILA BILA BILA BILA BILA BILA	i Breki bibli dibli bibli 1961
					
Principal Place	e of Business	Mailing Address		I I DOUTIN BLIN BIND LOSAT DIIN BIND IDIE BINDI GIDI	I BIBLE BEDEL DIGIL BEDEL LODI
1280 NE 48 STREET 1280 NE 48 STREET					
POMPANO BEACH FL 33064 POMPANO BEACH FL 3306					
				DO NOT WRITE IN THIS S	PACE
Í				3, Date Incorporated or Qualifed	
	·			04/17/1987	
		2a. Mailing Address		4. FEI Number	Applied For
21 26				59-2819155	Not Applicable
		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22 27 City & State City & State					
•, •		⊢ ′	•	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip Country Zip		Country			
24	25	<u> </u>	30	R. This corporation owes the current year Intar Personal Property Tax.	Yes □No
	9. Name and Address of Current]	10. Name and Address of New Registered A	
81 Name					
UMABIA ALDEBI				IAMES FREDERICO	
1280 N.E. 48TH STREET				Address (P.O. Box Number is Not Acceptable)	
POMPANO BEACH FL 33064					
84 City /) /) 85 Zip Code					
		DILIBALLO AFACU FI	85 Zip Code		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered					
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE OFFICE DATE OFFICE DATE DA					
12. OFFICERS AND DIRECTORS 13.				ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	EVPD	☐ DELETE	1,1 TITLE		☐ Change ☐ Additio⊓
NAME	RAMOS, OSIRIS		1.2 NAME.		
STREET ADDRESS			1,3 STREET ADDRESS		
CITY-ST-ZIP STUART FL 34997		-	1,4 CITY-ST-ZIP		
TITLE	CD	☐ DELETE	2.1 TITLE		Change
NAME	DIMARIA, ALBERT		2.2 NAME		}
STREET ADDRESS	740 NE 28 AVE		2.3 STREET ADDRESS	ISTO SE 11TH CT.	
CITY-ST-ZIP	POMPANO BCH FL		2, 4 CITY-ST-ZIP	ISTO SE 11TH ST. DEERFIELD BEACH FL	33441
TITLE	PTD	DELETE -	3.1 TITLE	TELL DON'T	☐ Change ☐ Addition
NAME	FREDERICO, JAMES		3.2 NAME		
STREET ADDRESS	3779 NW 52ND STREET		3.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33496	•	3.4. CITY+ST-ZIP		
TITLE	V	☐ DELETE	4.1 TITLE		Change
NAME	WILLIAMS, DENNIS		4, 2 NAME		'
STREET ADDRESS	6820 NW 75 CT.		4,3 STREET ADDRESS		ļ
CITY-ST-ZIP	PARKLAND FL		4,4 CITY-ST-ZIP	FULTON, PENNY	ב
TITLE	S	☐ DELETE	5.1 TMLE		Change
NAME	FULTON, PENNU		5.2 NAME	FULTONI PENIN	
ı			•	, v.v, , L-NN,)

CITY-ST-ZiP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attackment with an address, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

1280 NE 48TH STREET

POMPANO BCH FL 33064

DELETE

FREDERICO 4/10/99 954-785-2020

☐ Change

Addition